

PART B—ISSUE FEE TRANSMITTAL

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of Issue Fee or thereafter. See reverse for Certificate of Mailing.

1. CORRESPONDENCE ADDRESS <i>PAT. & TM. OFF.</i>		2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)	
<p>Lisa A. Haile SPENSLEY HORN JUBAS & LUBITZ 4225 Executive Square, Ste. 1400 La Jolla, CA 92037</p>		<p>INVENTOR'S NAME Gary R. Grotendorst Street Address 18401 Tomlinson Drive City, State and ZIP Code Lutz, Florida 33549</p>	
		<p>CO-INVENTOR'S NAME Douglas M. Bradham, Jr. Street Address 44 Acorn Circle, #202 City, State and ZIP Code Baltimore, MD 21204</p>	
<p><input type="checkbox"/> Check if additional changes are on reverse side</p>			

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/167,622	12/14/92	004	SPECTOR, L.	1812 08/03/94
First Named Applicant	GROTENDORST, LOS.			GARY R. RODRIGUEZ

TITLE OF INVENTION: A NOVEL CONNECTIVE TISSUE GROWTH FACTOR (CTGF)
(AS AMENDED)

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1	DD1294	506-069.000	D18	UTILITY	YES	\$585.00	11/03/94

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
<p>Lisa A. Haile SPENSLEY HORN JUBAS & LUBITZ 4225 Executive Square, Ste. 1400 La Jolla, CA 92037 Telephone (619) 455-5100</p>	<p>1 _____</p> <p>2 _____</p> <p>3 _____</p>

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5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)	6a. The following fees are enclosed: <input checked="" type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies 10 (Minimum of 10)
(1) NAME OF ASSIGNEE: University of South Florida	6b. The following fees should be charged to: DEPOSIT ACCOUNT NUMBER 19-3725 (ENCLOSED PART C)
(2) ADDRESS: (CITY & STATE OR COUNTY) 4202 East Fowler Av., Tampa, FL 33625	<input type="checkbox"/> Issue Fee <input checked="" type="checkbox"/> Advanced Order - # of Copies 10 (Minimum of 10) <input type="checkbox"/> Any Deficiencies in Enclosed Fees
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION	The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

This application is NOT assigned.
 Assignment is being previously submitted to the Patent and Trademark Office.
 Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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 (ENCLOSED PART C)

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 (Minimum of 10)
 Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

Lisa A. Haile (Date) 11/3/94

NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

TRANSMIT THIS FORM WITH FEE CERTIFICATE OF MAILING ON REVERSE



PART C—CHARGE TO DEPOSIT ACCOUNT

1. CORRESPONDENCE ADDRESS

11344 W. FULTONWOOD DR. #100
OFINGLEY 47791, JUDICIAL & JURIS
SUITE 200
1860 PARKWOOD DR., EAST
LOS ANGELES, CALIFORNIA 90067

Long Beach

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
001167-600	12/1/1993	90+	REPECTER, L.	11/12/94
First Named Applicant	REYTTING, RICHARD	CARRY, P.		

TITLE OF
INVENTION

A NOVEL CONNECTIVE TISSUE GROWTH FACTOR (CTGF)
(PCT AMENDMENT)

	ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
	001167-600	500-300,000	010	UTILITY	NO	\$100.00	11/12/94

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2a. The following fees are enclosed:
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 2b. The following fees should be charged to:
 DEPOSIT ACCOUNT NUMBER _____
 Issue Fee Advanced Order - # of Copies _____ 10
 Any Deficiencies in Enclosed Fees _____
 (Minimum of 10)

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 requested to apply the Issue Fee to the application identified above.

(Signature of party in interest of record)

Susan A. Haile (Date) 11/13/94

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TRANSMIT THIS FORM WITH PART B WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT

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D. 11/17/94 B-17

1. CORRESPONDENCE ADDRESS

Lisa A. Haile
SPENSLEY HORN JUBAS & LUBITZ
4225 Executive Square, Ste. 1400
La Jolla, CA 92037

2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME	Gary R. Grotendorst
Street Address	18401 Tomlinson Drive
City, State and ZIP Code	Lutz, Florida 33549
CO-INVENTOR'S NAME	Douglas M. Bradham, Jr.
Street Address	44 Acorn Circle, #202
City, State and ZIP Code	Baltimore, MD 21204

Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08167,628	12/14/93	004	SPECTOR, E	11/12 08/03/94
First Named Applicant	GROTTENDORST, LOS	GARY R.		

TITLE OF

INVENTION

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(AS AMENDED)

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1	DD1294	530-399.000	D18	UTILITY	YES	\$585.00	11/03/94

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Lisa A. Haile
SPENSLEY HORN JUBAS & LUBITZ
4225 Executive Square, Ste. 1400
La Jolla, CA 92037
Telephone (619) 455-5100

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1 _____
2 _____
3 _____

TW11106 11/17/94 08167628
TW11107 11/17/94 08167628

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19-3725 110 242 605.00CH
19-3725 110 561 30.00CH

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE: University of South Florida

(2) ADDRESS: (CITY & STATE OR COUNTY)

4202 East Fowler Av., Tampa, FL 33625

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION

This application is NOT assigned.

Assignment is being previously submitted to the Patent and Trademark Office.

Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.

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6b. The following fees should be charged to:

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(Minimum of 10)
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(Signature of party in interest of record)

Lisa A. Haile

(Date)

11/3/94

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